

FEB 17 2004

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PTO/SB/21 (08-00)

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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	09/756,428	
	Filing Date	January 8, 2001	
	First Named Inventor	Ola Johansson	
	Group Art Unit	3725	
	Examiner Name	Waymond D. Bray	
Total Number of Pages in This Submission	5	Attorney Docket Number	1174.064

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment /Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notification of Missing Requirements Under 35 USC 371 <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <b>DECLARATION</b>	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Formal Drawings  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<b>RECEIVED</b>  <b>FEB 20 2004</b>  <b>TECHNOLOGY CENTER #3700</b>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	David D. Stein, Registration No. 40,828 Boyle, Fredrickson, Newholm, Stein & Gratz, S.C.
Signature	<i>David D. Stein</i>
Date	FEBRUARY 11, 2004

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: February 11, 2004			
Type or printed name	Dawn M. Oleszak		
Signature	<i>Dawn M. Oleszak</i>	Date	Feb. 11, 2004

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<b>FEE TRANSMITTAL</b> <b>for FY 2002</b> Patent fees are subject to annual revision. <b>FEB 17 2004</b> U.S. PATENT AND TRADEMARK OFFICE		<b>Complete if Known</b>		
		Application Number	09/756,428	
		Filing Date	January 8, 2001	
		First Named Inventor	Ola Johansson	
		Examiner Name	Waymond D. Bray	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Group Art Unit	3725	
TOTAL AMOUNT OF PAYMENT		(\$1,480.00	Attorney Docket No.	1174.064

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<b>METHOD OF PAYMENT (check all that apply)</b>		<b>FEE CALCULATION (continued)</b>			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		<b>3. ADDITIONAL FEES</b>			
<input type="checkbox"/> Deposit Account Deposit Account Number: 50-1170 Deposit Account Name: Boyle, Fredrickson, Newholm, Stein & Gratz S.C.		<b>Large Entity</b>		<b>Small Entity</b>	
The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		Fee	Fee	Fee	Fee
		105	130	205	65
		127	50	227	25
		139	130	139	130
		147	2,520	147	2,520
		112	920*	112	920*
		113	1,840*	113	1,840*
		115	110	215	55
		116	420	216	210
		117	950	217	475
		118	1,480	218	740
		128	2,010	228	1,005
		119	330	219	165
		120	330	220	165
		121	290	221	145
		138	1,510	138	1,510
		140	110	240	55
		141	1,330	241	665
		142	1,330	242	665
		143	480	243	240
		144	640	244	320
		122	130	122	130
		123	50	123	50
		126	180	126	180
		581	40	581	40
		146	770	246	385
		149	770	249	385
		179	770	279	385
		169	900	169	900
		Other fee (specify) _____			
		*Reduced by Basic Filing Fee Paid			
		<b>SUBTOTAL (3)</b>		<b>(\$1,480.00</b>	

<b>1. BASIC FILING FEE</b>					
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	770	385	Utility filing fee	770.00
106	206	340	170	Design filing fee	
107	207	530	265	Plant filing fee	
108	208	770	385	Reissue filing fee	
114	214	160	80	Provisional filing fee	
<b>SUBTOTAL (1)</b>					<b>(\$0</b>
<b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>					
Total Claims	Extra Claims	Fee from below			Fee Paid
Independent Claims	-20**=	X			
Multiple Dependent	-3**=	X			
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	
103	203	18	9	Claims in excess of 20	
102	202	86	43	Independent claims in excess of 3	
104	204	290	145	Multiple dependent claim, if not paid	
109	209	86	43	**Reissue independent claims over original patent	
110	210	18	9	**Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>					<b>(\$0</b>
** or number previously paid, if greater; For Reissues, see above					

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	David D. Stein	Registration No. (Attorney/Agent)	40,828
Signature		Telephone	414-225-9755
		Date	2/11/2004

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